

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 44
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Amadeo		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Ortiz		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1443 W. Elsmere San Antonio, TX 78201		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Robert		
	NICKNAME LAST SUFFIX Bob Lott		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5045 Ayrshire Dr San Antonio, TX 78217		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 414-9966		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2008 09/25/2008		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 11/04/2008		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Bexar County Sheriff
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	<p>.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..</p>		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Ortiz, Amadeo (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00000001

**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ **GENERAL**

COMMITTEE ADDRESS

☐ **SPECIFIC**

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 34,850.30

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 30,993.27

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

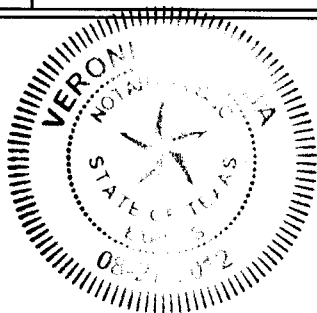
\$ 3,713.59

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 1,000.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Amadeo Ortiz
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amadeo Ortiz, this the 6 day of Oct, 20 08, to certify which, witness my hand and seal of office.

Veronica Barba

Signature of officer administering oath

Veronica Barba

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/19 Report: 3/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/27/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
3A AAA Limousine Service

6 Contributor address; City; State; Zip Code
111 Paseo Canada
San Antonio, TX 78232

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
A Action Bail Bonds

Contributor address; City; State; Zip Code
219 N. Comal
San Antonio, TX 78207

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Acevedo, Ernest

Contributor address; City; State; Zip Code
222 S. Flores St.
San Antonio, TX 78204

Amount of
contribution (\$)

\$450.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Acevedo, Joseph

Contributor address; City; State; Zip Code
1901 Buena Vista
San Antonio, TX 78207

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Acevedo, Paul

Contributor address; City; State; Zip Code
800 Dolorosa
Suite 102
San Antonio, TX 78207

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/19 Report: 4/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Acevedo, Rochelle

6 Contributor address; City; State; Zip Code
1422 Buena Vista
San Antonio, TX 78207

7 Amount of
contribution (\$)

\$300.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Acevedo, Saul

Contributor address; City; State; Zip Code
1101 Buena Vista St.
San Antonio, TX 78207

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Adams, Fred

Contributor address; City; State; Zip Code
4700 W. Military Dr.
San Antonio, TX 78242

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Aguilera, Joseph

Contributor address; City; State; Zip Code
111 Soledad
Suite 825
San Antonio, TX 78205

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alexander, Stewart

Contributor address; City; State; Zip Code
8018 Broadway
San Antonio, TX 78209

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/19 Report: 5/44	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen & Roig, LLP 6 Contributor address; City; State; Zip Code 3003 NE Loop 410 STE 201 San Antonio, TX 78230	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen & Roig, LLP Contributor address; City; State; Zip Code 3003 NE Loop 410 STE 201 San Antonio, TX 78230	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anzaldua, Fidencio Contributor address; City; State; Zip Code 7310 Scotland Dr. San Antonio, TX 78213	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bartolomei & Duganni, PLLC Contributor address; City; State; Zip Code 420 Baltimore Ave. San Antonio, TX 78215	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Basaldua, J.M. Contributor address; City; State; Zip Code 2731 Lovelace San Antonio, TX 78217	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/19 Report: 6/44	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beers, Michael 6 Contributor address; City; State; Zip Code 3120 CR 4516 Hondo, TX 78861	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blount, Mike Contributor address; City; State; Zip Code P.O. Box 154 Elmendorf, TX 78112	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Alan Contributor address; City; State; Zip Code 222 Main Plaza San Antonio, TX 78205	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Shawn Contributor address; City; State; Zip Code 540 S. St. Mary's St. San Antonio, TX 78205	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Doug Contributor address; City; State; Zip Code 18847 Redland Rd. Suite 210 San Antonio, TX 78259	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/19 Report: 7/44	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/27/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campos, J.B. 6 Contributor address; City; State; Zip Code 1010 Village Shore Dr. Canyon Lake, TX 78133	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carnot, Alfred Contributor address; City; State; Zip Code 819 Midnight Drive San Antonio, TX 78258	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carnot, Frances Contributor address; City; State; Zip Code 819 Midnight Drive San Antonio, TX 78258	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cedillo, Ricardo Contributor address; City; State; Zip Code 755 E. Mulberry Ave. Suite 500 San Antonio, TX 78212	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christian, David Contributor address; City; State; Zip Code 310 S. St.Mary's San Antonio, TX 78205	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/19 Report: 8/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/27/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Clark, Lucy

6 Contributor address; City; State; Zip Code
21096 Priest Rd.
Elmendorf, TX 78112

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Coach's Corner

Contributor address; City; State; Zip Code
2403 Vance Jackson
San Antonio, TX 78213

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Communication Workers of America

Contributor address; City; State; Zip Code
501 3rd Street NW
Washington, DC 20001

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delgado, Jimmy

Contributor address; City; State; Zip Code
310 S. St. Mary's
Suite 1220
San Antonio, TX 78208

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Eaton, Ken

Contributor address; City; State; Zip Code
20207 Messina
San Antonio, TX 78258

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/19 Report: 9/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/15/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Elizondo, Paul

6 Contributor address; City; State; Zip Code
3451 W. Woodlawn Ave.
San Antonio, TX 78228-4853

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Embrey, Bruce

Contributor address; City; State; Zip Code
1126 W. Commerce St
San Antonio, TX 78207

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Embry, Bruce

Contributor address; City; State; Zip Code
219 N. Comal
San Antonio, TX 78207

Amount of
contribution (\$)

\$1,500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Esparza, Roland

Contributor address; City; State; Zip Code
325 S. Flores St.
San Antonio, TX 78204

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Flores, Charles

Contributor address; City; State; Zip Code
8230 Misty Willow
San Antonio, TX 78250

Amount of
contribution (\$)

\$1,300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/19 Report: 10/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Ford, Buddy

6 Contributor address; City; State; Zip Code

825 E. Locust St.
San Antonio, TX 78212

7 Amount of
contribution (\$)

\$1,500.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

Gamez, Jesse

Contributor address; City; State; Zip Code

111 E. Commerce St.
San Antonio, TX 78205

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

Garcia, Aurora

Contributor address; City; State; Zip Code

10103 Oak Saddle
San Antonio, TX 78254

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

Garcia, Evaristo

Contributor address; City; State; Zip Code

929 Sunshine Dr.
San Antonio, TX 78228

Amount of
contribution (\$)

\$600.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

Garcia, Rolando

Contributor address; City; State; Zip Code

800 Dolorosa
Suite 101
San Antonio, TX 78207

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/19 Report: 11/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gibridge, Rich

6 Contributor address; City; State; Zip Code
3826 Majestic
San Antonio, TX 78228

7 Amount of
contribution (\$)

\$502.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gonzalez, J.G. III

Contributor address; City; State; Zip Code
818 Saipan
San Antonio, TX 78221

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guess, Milton

Contributor address; City; State; Zip Code
800 Navarro St.
Suite 210
San Antonio, TX 78205

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harrison, PhD, G.R.

Contributor address; City; State; Zip Code
111 Oakhurst
San Antonio, TX 78209

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hasslocher, James

Contributor address; City; State; Zip Code
129 Haskin
San Antonio, TX 78209

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/19 Report: 12/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

07/22/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hernden, A. L.

6 Contributor address; City; State; Zip Code
222 E. Main Plaza
San Antonio, TX 78205

7 Amount of
contribution (\$)

\$500.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Huber, Jennifer

Contributor address; City; State; Zip Code
5722 Timber Star
San Antonio, TX 78250

Amount of
contribution (\$)

\$400.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Karam, Richard

Contributor address; City; State; Zip Code
8118 Datapoint Dr.
San Antonio, TX 78229

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Karam, Jr., Edward

Contributor address; City; State; Zip Code
571 Donaldson
San Antonio, TX 78201

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
LD Designs

Contributor address; City; State; Zip Code
1422 Lightstone Dr.
San Antonio, TX 78258

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/19 Report: 13/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

09/15/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Leon, Jack

6 Contributor address; City; State; Zip Code
500 Lexington
San Antonio, TX 78215

7 Amount of
contribution (\$) \$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Longoria, Manuel

Contributor address; City; State; Zip Code
31035 Retama Ridge
Bulverde, TX 78163

Amount of
contribution (\$) \$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lopez, Ovideo

Contributor address; City; State; Zip Code
281 Bulington Dr.
San Antonio, TX 78245

Amount of
contribution (\$) \$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
M.T.C. Real Estate

Contributor address; City; State; Zip Code
800 Dolorosa
Suite 204
San Antonio, TX 78207

Amount of
contribution (\$) \$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
McLane, David

Contributor address; City; State; Zip Code
1110 S. Alamo St.
San Antonio, TX 78210

Amount of
contribution (\$) \$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/19 Report: 14/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/22/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Meachum, Martin

6 Contributor address; City; State; Zip Code
403 Heimer Rd.
Apt. 1012
San Antonio, TX 78232

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Minarich, Madonna

Contributor address; City; State; Zip Code
12123 Orchid Blossom
San Antonio, TX 78247

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Myers, David

Contributor address; City; State; Zip Code
186 Marlana
San Antonio, TX 78213

Amount of
contribution (\$)

\$750.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Myers, David

Contributor address; City; State; Zip Code
186 Marlana
San Antonio, TX 78213

Amount of
contribution (\$)

\$2,300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Naturaleza Celestial

Contributor address; City; State; Zip Code
514 W. Commerce
San Antonio, TX 78207

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/19 Report: 15/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

09/15/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Nieto, Christopher

6 Contributor address; City; State; Zip Code
2535 W. Mulberry Ave.
San Antonio, TX 78228

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/22/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ninam, Mathews

Contributor address; City; State; Zip Code
1803 Ravenscroft Dr.
San Antonio, TX 78253

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ortiz, Lorenzo

Contributor address; City; State; Zip Code
3 Greens Whisper
San Antonio, TX 78216

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pacheco, Federico

Contributor address; City; State; Zip Code
6016 Mike Nesmith St
San Antonio, TX 78238

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pacheco, Frank

Contributor address; City; State; Zip Code
1610 W. Hildebrand Ave
San Antonio, TX 78201

Amount of
contribution (\$)

\$230.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/19 Report: 16/44	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 08/05/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perales, Raul 6 Contributor address; City; State; Zip Code 201 W. Poplar San Antonio, TX 78212	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Monica Contributor address; City; State; Zip Code 9527 Sedula San Antonio, TX 78250	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pina, Joe Contributor address; City; State; Zip Code 310 W. Skyview Dr. San Antonio, TX 78228	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Platinum Tattoos Contributor address; City; State; Zip Code 1706 SW Loop 410 Suite 101 San Antonio, TX 78227	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Premier Books of South Texas Contributor address; City; State; Zip Code 7927 Union Shls San Antonio, TX 78244	Amount of contribution (\$) \$84.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/19 Report: 17/44	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 07/17/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rangel, Rolando 6 Contributor address; City; State; Zip Code 1323 W. Martin San Antonio, TX 78207	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rio Battery Co. Contributor address; City; State; Zip Code 531 Guadalupe St. San Antonio, TX 78207	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Robert Contributor address; City; State; Zip Code 5458 Colton Creek San Antonio, TX 78251	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romo, Lawrence Contributor address; City; State; Zip Code 2906 Wood Knoll San Antonio, TX 78251	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salyer, Steven Contributor address; City; State; Zip Code 13507 Demeter Universal City, TX 78148	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/19 Report: 18/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Police Officer's Association (PAC)

6 Contributor address; City; State; Zip Code
1939 N.E. Loop 410 Suite 300
San Antonio, TX 78217

7 Amount of
contribution (\$)

\$600.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Produce Market

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$353.10

In-kind contribution
description (if applicable)
Office Space for July

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Produce Market

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$353.10

In-kind contribution
description (if applicable)
Office Space Rent -
Aug. 08

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Produce Market

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$353.10

In-kind contribution
description (if applicable)
Office Space Rent -
Sept. 08

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sanchez, Ronald

Contributor address; City; State; Zip Code
200 N. Comal
San Antonio, TX 78207

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/19 Report: 19/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sandoval, Gilbert

6 Contributor address; City; State; Zip Code
5903 Forest Knoll
San Antonio, TX 78240

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Serna, Cesar

Contributor address; City; State; Zip Code
120 Villita
San Antonio, TX 78205

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Serna, Jr., Baltazar

Contributor address; City; State; Zip Code
126 Villita
San Antonio, TX 78205

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/28/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stonewall Democrats of San Antonio

Contributor address; City; State; Zip Code
P.O. Box 12814
San Antonio, TX 78212

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/28/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Terry, Roger

Contributor address; City; State; Zip Code
8918 Tesoro Dr.
Suite 301
San Antonio, TX 78217

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/19 Report: 20/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

09/22/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Trainer, Michael

6 Contributor address; City; State; Zip Code
1249 Hillside Oaks Dr
La Vernia, TX 78121

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/15/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Valadez, Jr., Ramiro

Contributor address; City; State; Zip Code
P.O. Box 240520
San Antonio, TX 78224

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Valdez, Robert

Contributor address; City; State; Zip Code
400 S. Main St.
Suite 203
San Antonio, TX 78204

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Vargas, Robert

Contributor address; City; State; Zip Code
800 Dolorosa
Suite 105
San Antonio, TX 78207

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Villareal, Lee Roy

Contributor address; City; State; Zip Code
P.O. Box 767
Cibolo, TX 78108

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/19 Report: 21/44

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

08/05/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wentland, Kevin

6 Contributor address; City; State; Zip Code
8603 Sedona Cir.
Helotes, TX 78023

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
White, Collis

Contributor address; City; State; Zip Code
115 E. Travis Ste 1705
San Antonio, TX 78205

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Willborn, Carol

Contributor address; City; State; Zip Code
4004 Shady Oak St.
San Antonio, TX 78229

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yuchnitz, Michael

Contributor address; City; State; Zip Code
1706 SW Loop 410
Suite 101
San Antonio, TX 78227

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zepeda, Robert

Contributor address; City; State; Zip Code
222 S. Flores St.
San Antonio, TX 78204

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/23 Report: 22/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/03/2008

5 Payee name

A Action Bail Bonds

7Amount
(\$)

\$560.00

6 Payee address; City; State; Zip Code1126 E. Commerce St.
San Antonio, TX 78207**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

09/15/2008

Payee name

A Action Bail Bonds

Amount
(\$)

\$28.00

Payee address; City; State; Zip Code

1126 E. Commerce St.
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/31/2008

Payee name

Absolute Rentals

Amount
(\$)

\$178.52

Payee address; City; State; Zip Code

7300 Caribou
Suite 1
San Antonio, TX 78238

Purpose of payment (See instructions regarding type of information required.)

Fundraiser table rental

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/28/2008

Payee name

Aldaco Mex Cuisine

Amount
(\$)

\$51.25

Payee address; City; State; Zip Code

100 Hoefgen Ave.
San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/23 Report: 23/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/17/2008

5 Payee name

Allied Ad Agency

7Amount
(\$)

\$3,034.11

6 Payee address; City; State; Zip Code3700 Blanco Rd.
San Antonio, TX 78212**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/22/2008

Payee name

AT & T Telephone

Amount
(\$)

\$71.45

Payee address; City; State; Zip Code

P.O. Box 930170
Dallas, TX 75393-0170

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/06/2008

Payee name

AT & T Telephone

Amount
(\$)

\$261.48

Payee address; City; State; Zip Code

P.O. Box 930170
Dallas, TX 75393-0170

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/14/2008

Payee name

AT & T Telephone

Amount
(\$)

\$222.04

Payee address; City; State; Zip Code

P.O. Box 930170
Dallas, TX 75393-0170

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/23 Report: 24/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/08/2008

5 Payee name

AT & T Telephone

7Amount
(\$)

\$126.80

6 Payee address; City; State; Zip CodeP.O. Box 930170
Dallas, TX 75393-0170**8** Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

09/02/2008

Payee name

Aveneda Guadalupe Assn.

Amount
(\$)

\$50.00

Payee address; City; State; Zip Code

1327 Guadalupe St.
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Parade entry fee

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

09/16/2008

Payee name

Beef & Bourbon Steak House

Amount
(\$)

\$25.51

Payee address; City; State; Zip Code

4946 Rigsby
San Antonio, TX 78222

Purpose of payment (See instructions regarding type of information required.)

F & B

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

07/07/2008

Payee name

Bexar County Elections

Amount
(\$)

\$50.00

Payee address; City; State; Zip Code

203 W. Nueva
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

election data

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/23 Report: 25/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

4 Date

07/26/2008

5 Payee name

Blount, Mike

7

Amount

(\$)

\$40.00

6 Payee address; City; State; Zip Code4462 E. Houston
Suite 100
San Antonio, TX 78220**8** Purpose of payment (See instructions regarding type of information required.)

Contribution

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

08/21/2008

Payee name

CDS

Amount

(\$)

\$64.88

Payee address; City; State; Zip Code

3559 Belgium Ln.
San Antonio, TX 78219

Purpose of payment (See instructions regarding type of information required.)

Fundraiser equipment rental

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

08/01/2008

Payee name

Cowgirls Unlimited

Amount

(\$)

\$350.00

Payee address; City; State; Zip Code

P.O. Box 1442
La Vernia, TX 78121

Purpose of payment (See instructions regarding type of information required.)

Staff support for fundraiser

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

07/08/2008

Payee name

Delicious Tamales

Amount

(\$)

\$12.00

Payee address; City; State; Zip Code

3003 Pleasanton Rd.
San Antonio, TX 78221

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/23 Report: 26/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/22/2008

5 Payee name
Digital Edge**6** Payee address; City; State; Zip Code
3463 Magic Dr.
San Antonio, TX 78229**7** Amount
(\$)

\$750.00

8 Purpose of payment (See instructions regarding type of information required.)

Marketing & Promotion

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

08/07/2008

Payee name
Digital ExtremePayee address; City; State; Zip Code
12607 Prima Vista
San Antonio, TX 78233Amount
(\$)

\$725.11

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

09/21/2008

Payee name
Digital ExtremePayee address; City; State; Zip Code
12607 Prima Vista
San Antonio, TX 78233Amount
(\$)

\$599.27

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

09/17/2008

Payee name
Dr. Don's Buttons, Badges & MagnetsPayee address; City; State; Zip Code
3906 W. Morrow Dr.
Glendale, AZ 85308Amount
(\$)

\$240.33

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/23 Report: 27/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/23/2008

5 Payee name
Easy Drive**6** Payee address; City; State; Zip Code
906 Ruiz St.
San Antonio, TX 78207**7** Amount
(\$)

\$861.76

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/26/2008

Payee name
El Rafas CafePayee address; City; State; Zip Code
1535 W Hildebrand
San Antonio, TX 78201Amount
(\$)

\$18.49

Purpose of payment (See instructions regarding type of information required.)

F&B- Business Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/03/2008

Payee name
El Solo BistroPayee address; City; State; Zip Code
728 S. Presa
San Antonio, TX 78210Amount
(\$)

\$21.92

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/29/2008

Payee name
Enchilada WarehousePayee address; City; State; Zip Code
2106 N. St. Mary's St.
San Antonio, TX 78212Amount
(\$)

\$28.93

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/23 Report: 28/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/08/2008

5 Payee name

Finck Cigar Co.

7Amount
(\$)

\$61.58

6 Payee address; City; State; Zip Code414 Vera Cruz
San Antonio, TX 78283**8** Purpose of payment (See instructions regarding type of information required.)

Fundraiser supplies

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/29/2008

Payee name

Freddy's Restaurant

Amount
(\$)

\$6.00

Payee address; City; State; Zip Code

1201 S. Flores
San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

F & B - Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/20/2008

Payee name

Freddy's Restaurant

Amount
(\$)

\$23.52

Payee address; City; State; Zip Code

1201 S. Flores
San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

F & B - Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/31/2008

Payee name

Gabriel's #41-05

Amount
(\$)

\$36.74

Payee address; City; State; Zip Code

837 W. Hildebrand
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Fundraiser - Beverages

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/23 Report: 29/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/17/2008

5 Payee name

Green Martian Software

7Amount
(\$)

\$233.00

6 Payee address; City; State; Zip Code

3359 S. Main St.

Suite 286

Salt Lake City, UT 84115

8 Purpose of payment (See instructions regarding type of information required.)

Computer software

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

07/26/2008

Payee name

Guadalupe Lumber Co.

Amount
(\$)

\$9.05

Payee address; City; State; Zip Code

1547 S. Zarzamora

San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Supplies

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

07/01/2008

Payee name

HEB Grocery

Amount
(\$)

\$29.07

Payee address; City; State; Zip Code

2118 Fredericksburg Rd

San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

F & B Staff Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

07/25/2008

Payee name

HEB Grocery

Amount
(\$)

\$30.48

Payee address; City; State; Zip Code

2118 Fredericksburg Rd

San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

F & B Staff Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/23 Report: 30/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

08/04/2008

5 Payee name
HEB Grocery**6** Payee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201**7** Amount
(\$)

\$31.11

8 Purpose of payment (See instructions regarding type of information required.)

F & B Staff Meeting

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

08/10/2008

Payee name
HEB GroceryPayee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201Amount
(\$)

\$23.32

Purpose of payment (See instructions regarding type of information required.)

F & B

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

09/20/2008

Payee name
HEB GroceryPayee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201Amount
(\$)

\$19.60

Purpose of payment (See instructions regarding type of information required.)

F & B

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

09/20/2008

Payee name
HEB GroceryPayee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201Amount
(\$)

\$6.01

Purpose of payment (See instructions regarding type of information required.)

F & B Staff

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/23 Report: 31/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

08/02/2008

5 Payee name
Home Depot**6** Payee address; City; State; Zip Code
435 Sunset
San Antonio, TX 78209**7** Amount
(\$)

\$52.51

8 Purpose of payment (See instructions regarding type of information required.)

Supplies

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/25/2008

Payee name
Hooters NorthwestPayee address; City; State; Zip Code
8527 Wurzbach Rd.
San Antonio, TX 78240Amount
(\$)

\$50.77

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/01/2008

Payee name
Ink SpotPayee address; City; State; Zip Code
7115 Blanco Rd.
Suite 105
San Antonio, TX 78216Amount
(\$)

\$127.74

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/11/2008

Payee name
Jim's Restaurant #3Payee address; City; State; Zip Code
3319 Hillcrest
San Antonio, TX 78201Amount
(\$)

\$25.68

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/23 Report: 32/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/22/2008

5 Payee name

Jim's Restaurant #3

7Amount
(\$)

\$15.49

6 Payee address; City; State; Zip Code3319 Hillcrest
San Antonio, TX 78201**8** Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

09/22/2008

Payee name

Jim's Restaurant #3

Amount
(\$)

\$15.63

Payee address; City; State; Zip Code

3319 Hillcrest
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/06/2008

Payee name

Las Connyn

Amount
(\$)

\$100.00

Payee address; City; State; Zip Code

506 Rayburn Dr.
San Antonio, TX 78221

Purpose of payment (See instructions regarding type of information required.)

Fundraiser entertainment

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/16/2008

Payee name

Las Palapas

Amount
(\$)

\$10.87

Payee address; City; State; Zip Code

1802 Walzem Rd.
San Antonio, TX 78218

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/23 Report: 33/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 08/09/2008	5 Payee name Leticia Mexican Restaurant 6 Payee address; City; State; Zip Code 1922 N. Zarzamora San Antonio, TX 78201	7 Amount (\$) \$22.97
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8 Purpose of payment (See instructions regarding type of information required.) F & B Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 07/03/2008	Payee name Lowe's Home Center Payee address; City; State; Zip Code 203 Loop 410 SW San Antonio, TX 78245	Amount (\$) \$29.95
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Purpose of payment (See instructions regarding type of information required.) Supplies for fundraiser (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	--

Date 08/09/2008	Payee name Lowes Home Improvement Payee address; City; State; Zip Code 7901 Callaghan Road San Antonio, TX 78229	Amount (\$) \$7.54
------------------------	--	---------------------------

Purpose of payment (See instructions regarding type of information required.) Supplies to erect campaign signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	--

Date 08/17/2008	Payee name Luciano Restaurant Payee address; City; State; Zip Code 7400 San Pedro Suite 470 San Antonio, TX 78216	Amount (\$) \$37.19
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.) Fundraiser F & B (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/23 Report: 34/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

08/17/2008

5 Payee name

Luciano Restaurant

7Amount
(\$)

\$2,451.88

6 Payee address; City; State; Zip Code

7400 San Pedro

Suite 470

San Antonio, TX 78216

8 Purpose of payment (See instructions regarding type of information required.)

Fundraiser F & B

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/14/2008

Payee name

Mexican Manhattan

Amount
(\$)

\$16.98

Payee address; City; State; Zip Code

110 Soledad

San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/23/2008

Payee name

Molino Rojo Cafe

Amount
(\$)

\$14.51

Payee address; City; State; Zip Code

13032 Nacogdoches Rd.

San Antonio, TX 78217

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/18/2008

Payee name

Monarch Trophy Studio

Amount
(\$)

\$186.95

Payee address; City; State; Zip Code

2121 N.W. Military Dr.

San Antonio, TX 78213

Purpose of payment (See instructions regarding type of information required.)

Trophies for TX Hold'em Fundraiser

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #
Schedule: 14/23 Report: 35/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 08/14/2008	5 Payee name Northeast Partnership for Economic Development 6 Payee address; City; State; Zip Code 2150 Universal City Blvd. Universal City, TX 78148	7 Amount (\$) \$10.00
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8 Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 08/13/2008	Payee name Northwest Democrats Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268	Amount (\$) \$100.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Donation** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 08/20/2008	Payee name Northwest Democrats Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268	Amount (\$) \$100.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Campaign Marketing** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 09/22/2008	Payee name Office Depot Payee address; City; State; Zip Code 5601 Bandera Rd San Antonio, TX 78238	Amount (\$) \$104.68
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Office supplies** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/23 Report: 36/44
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 09/25/2008	5 Payee name Office Depot 6 Payee address; City; State; Zip Code 5601 Bandera Rd San Antonio, TX 78238	7 Amount (\$) \$68.58
8 Purpose of payment (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 07/03/2008	Payee name Office Depot #346 Payee address; City; State; Zip Code 3713 Colony Dr. San Antonio, TX 78230	Amount (\$) \$28.09
Purpose of payment (See instructions regarding type of information required.) Office Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 08/15/2008	Payee name Ortiz, Alma Payee address; City; State; Zip Code 802 King Ave. San Antonio, TX 78211	Amount (\$) \$2,000.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement of Campaign Loan (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 07/31/2008	Payee name Ortiz, Liz Payee address; City; State; Zip Code 1443 W. Elsmere Ave. San Antonio, TX 78201	Amount (\$) \$27.01
Purpose of payment (See instructions regarding type of information required.) Reimbursement of F & B Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/23 Report: 37/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/16/2008

5 Payee name

Ortiz, Liz

7 Amount
(\$)

\$100.00

6 Payee address; City; State; Zip Code1443 W. Elsmere Ave.
San Antonio, TX 78201**8** Purpose of payment (See instructions regarding type of information required.)

Reimbursement of a donation

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/26/2008

Payee name

Paris Hatters

Amount
(\$)

\$70.20

Payee address; City; State; Zip Code

119 N. Broadway
San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

09/10/2008

Payee name

Paris Hatters

Amount
(\$)

\$278.33

Payee address; City; State; Zip Code

119 N. Broadway
San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/25/2008

Payee name

Personal Pantry Catering

Amount
(\$)

\$3,147.72

Payee address; City; State; Zip Code

1914 Fredericksburg Rd.
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

Fundraiser Catering

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/23 Report: 38/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/25/2008

5 Payee name

Pico De Gallo Rest.

7 Amount
(\$)

\$36.33

6 Payee address; City; State; Zip Code115 S. Leona
San Antonio, TX 78205**8** Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

08/12/2008

Payee name

Randolph Chamber of Commerce

Amount
(\$)

\$30.00

Payee address; City; State; Zip Code

1001 Pat Booker Rd.
Suite 206
Universal City, TX 78148

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

09/22/2008

Payee name

Realtypak

Amount
(\$)

\$78.00

Payee address; City; State; Zip Code

7115 Blanco Rd.
Suite 105
San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Fundraiser supplies

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

07/22/2008

Payee name

Ridgewood Cleaners

Amount
(\$)

\$45.89

Payee address; City; State; Zip Code

610 West Ave.
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

Other expense

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/23 Report: 39/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

08/06/2008

5 Payee name

Ridgewood Cleaners

7Amount
(\$)

\$30.00

6 Payee address; City; State; Zip Code610 West Ave.
San Antonio, TX 78201**8** Purpose of payment (See instructions regarding type of information required.)

Other expense

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

08/18/2008

Payee name

Ridgewood Cleaners

Amount
(\$)

\$12.96

Payee address; City; State; Zip Code

610 West Ave.
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

Other expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

08/24/2008

Payee name

Ridgewood Cleaners

Amount
(\$)

\$24.82

Payee address; City; State; Zip Code

610 West Ave.
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

Other expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

09/25/2008

Payee name

Ridgewood Cleaners

Amount
(\$)

\$14.01

Payee address; City; State; Zip Code

610 West Ave.
San Antonio, TX 78201

Purpose of payment (See instructions regarding type of information required.)

Other expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 19/23 Report: 40/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 07/07/2008	5 Payee name Sea Island 6 Payee address; City; State; Zip Code 8223 Agora Pkwy Live Oak, TX 78154	7 Amount (\$) \$41.90
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8 Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 07/29/2008	Payee name Stein Mart Payee address; City; State; Zip Code 999 E. Basse Rd. San Antonio, TX 78209	Amount (\$) \$27.01
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Purpose of payment (See instructions regarding type of information required.)
Fundraiser supplies** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 08/13/2008	Payee name Stonewall Democrats Payee address; City; State; Zip Code P.O. Box 12814 San Antonio, TX 78212	Amount (\$) \$150.00
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Purpose of payment (See instructions regarding type of information required.)
donation** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 08/11/2008	Payee name Symantec Software Payee address; City; State; Zip Code 20330 Stevens Creek Rd. Cupertino, CA 95014	Amount (\$) \$49.99
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Purpose of payment (See instructions regarding type of information required.)
Internet Security software** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/23 Report: 41/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

08/21/2008

5 Payee name

The Palm Restaurant

7Amount
(\$)

\$353.62

6 Payee address; City; State; Zip Code233 East Houston
San Antonio, TX 78205**8** Purpose of payment (See instructions regarding type of information required.)

F & B

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

08/27/2008

Payee name

Time Warner Media

Amount
(\$)

\$10,899.00

Payee address; City; State; Zip Code

900 Arion Pkwy. #101
San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Marketing & Promotion

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

07/31/2008

Payee name

Toudouze Market

Amount
(\$)

\$68.99

Payee address; City; State; Zip Code

800 Buena Vista
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

F & B for Tx Hold'em fundraiser

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

07/16/2008

Payee name

Unidas, Mujeres

Amount
(\$)

\$50.00

Payee address; City; State; Zip Code

307 E. Evergreen St.
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

contribution to others

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/23 Report: 42/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

09/21/2008

5 Payee name

Urias, Gilbert

7Amount
(\$)

\$39.01

6 Payee address; City; State; Zip Code70 Montana Bay
San Antonio, TX 78254**8** Purpose of payment (See instructions regarding type of information required.)

Reimbursement for supplies

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

09/21/2008

Payee name

Urias, Gilbert

Amount
(\$)

\$13.54

Payee address; City; State; Zip Code

70 Montana Bay
San Antonio, TX 78254

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for supplies

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

09/24/2008

Payee name

US Postal Service

Amount
(\$)

\$84.00

Payee address; City; State; Zip Code

Arsenal Station
San Antonio, TX 78204-9998

Purpose of payment (See instructions regarding type of information required.)

Stamps

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

09/24/2008

Payee name

US Postal Service

Amount
(\$)

\$168.00

Payee address; City; State; Zip Code

Arsenal Station
San Antonio, TX 78204-9998

Purpose of payment (See instructions regarding type of information required.)

Stamps

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/23 Report: 43/44

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/30/2008

5 Payee name

Valero Store #1030

7Amount
(\$)

\$60.00

6 Payee address; City; State; Zip Code1171 Coliseum Rd.
San Antonio, TX 78219**8** Purpose of payment (See instructions regarding type of information required.)

Auto Expense

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

09/22/2008

Payee name

Valero Store #1030

Amount
(\$)

\$75.00

Payee address; City; State; Zip Code

1171 Coliseum Rd.
San Antonio, TX 78219

Purpose of payment (See instructions regarding type of information required.)

Auto Expense

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

08/12/2008

Payee name

Vargas, Roberto

Amount
(\$)

\$130.00

Payee address; City; State; Zip Code

800 Dolorosa
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Legal Counsel

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

09/24/2008

Payee name

Wachovia Bank

Amount
(\$)

\$53.85

Payee address; City; State; Zip Code

7750 I.H. 10 West
Suite 1000
San Antonio, TX 78229

Purpose of payment (See instructions regarding type of information required.)

Bank Service Charges

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 23/23 Report: 44/44**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

07/20/2008

5 Payee name

Wal Mart

7Amount
(\$)

\$66.43

6 Payee address; City; State; Zip Code1200 SE Military Dr
San Antonio, TX 78214**8** Purpose of payment (See instructions regarding type of information required.)

Office Supplies

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

07/31/2008

Payee name

Wal Mart

Amount
(\$)

\$95.18

Payee address; City; State; Zip Code

1200 SE Military Dr
San Antonio, TX 78214

Purpose of payment (See instructions regarding type of information required.)

Fundraiser Supplies

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

09/03/2008

Payee name

West Avenue Panchitos Restaurant

Amount
(\$)

\$38.14

Payee address; City; State; Zip Code

12403 West Ave
San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

08/01/2008

Payee name

West San Antonio Chamber of Commerce

Amount
(\$)

\$175.00

Payee address; City; State; Zip Code

314 El Paso
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Membership dues

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐